

PATENT APPLICATION

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In re Application of:	`	
MAKOTA OGURA Application No.: 09/342,255	;	Examiner: Thomas M. Sember Group Art Unit: 2875
Filed: June 29, 1999) :)	
FOR: LIGHT CONDUCTIVE MEMBER, ILLUMINATING DEVICE HAVING THE SAME, AND INFORMATION PROCESSING APPARATUS HAVING	·) :) :)	Octobor 6, 2002
THE ILLUMINATING DEVICE)	October 6, 2003

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT AND PETITION FOR EXTENSION OF TIME

Sir:

Applicant petitions to extend the time for response to the Office Action dated June 4, 2003 to and including October 4, 2003. A check in the amount of \$ 110.00 for payment of the extension fee is enclosed. Please charge any additional fee required for the extension, and credit any overpayment, to Deposit Account 06-1205. The claim amendments are reflected in the listing that begins at page 2. The remarks begin at page 4.

10/15/2003 WASFAW1 00000048 09342255 110.00 OP)1 FC:1251

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

October 6, 2003 (Date of Deposit)

PETER G. THURLOW (Reg. No. 47,138)

(Name of Attorney for Applicant)

October 6, 2003

Signature Date of Signature MAKOTA OGURA

Docket No. 03500.011293.1

Application No.: 09/342,255

Examiner: Thomas M. Sember

Filed: June 29, 1999

Group Art Unit: 2875

· For: LIGHT CONDUCTIVE MEMBER,

Date: October 6, 2003

ILLUMINATING DEVICE HAVING THE SAME, AND INFORMATION PROCESSING

APPARATUS HAVING THE ILLUMINATING DEVICE

COMMISSIONER FOR PATENTS P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

		С	LAIMS AS AMEN	VDED		
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 5 ′	MINUS	** 24	= 0	x \$9 \$18	\$0
INDEP. CLAIMS	* 1	MINUS	***	- 0	x \$43 \$86	\$0
Fee for Multiple Dependent claims \$145°/\$290			\$ 0			
			TOTAL ADDITI			\$ 0

If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

	Verified Statement claiming small entity status is enclosed, if not filed previously.
	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06 1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
X	A check in the amount of \$_110.00 to cover the fee for a One month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,
	Attorney for Applicant Registration No. 47,138

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3800 Facsimile: (212) 218-2200

Form #120

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